



## APPLICATION FOR EMPLOYMENT

FLINT RIVERQUARIUM, INC. IS COMMITTED TO A DRUG-FREE WORKPLACE. Also, qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, sex, handicap, disability, veteran status, marital status, sexual orientation, or any other characteristic protected by law. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Social Security No. \_\_\_\_\_

For which position do you wish to be considered? \_\_\_\_\_

What source led you to make application with us? \_\_\_\_\_

What is your availability (days, hours)? \_\_\_\_\_

## **EMPLOYMENT HISTORY**

Please list your complete employment history. List present or most recent employer first. Use additional page, if necessary.

Employer	Employed (Mo./Yr.)  From:  To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				
Employer	Employed (Mo./Yr.)  From:  To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				
Employer	Employed (Mo./Yr.)  From:  To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				

## **EDUCATION**

Schools:	Name & Location of School	Circle Last Year Completed	Major Courses	Diploma or Degree?
High School		7 8 9 10 11 12		
College		1 2 3 4 more		
Business or Trade School		Months Attended		

If you served in the United States Armed Forces, briefly describe the skills you acquired \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **PERSONAL INFORMATION**

Are you legally authorized to work in the U.S.?      Yes \_\_\_\_\_ No \_\_\_\_\_

(NOTE: You will be required to furnish documents to verify your eligibility for employment in accordance with the Immigration Reform and Control Act and your employment is contingent upon furnishing such documents.)

Name, address and telephone number of someone other than a household member we can contact in case of an emergency \_\_\_\_\_

Are you at least 18 years of age?      Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime (felony)?    Yes \_\_\_\_\_ No \_\_\_\_\_ (A conviction does not automatically bar you from employment)  
If Yes, give details \_\_\_\_\_

If you are an experienced operator of any office machines or equipment, please list \_\_\_\_\_

\_\_\_\_\_ Typing Speed? \_\_\_\_\_ wpm      Shorthand \_\_\_\_\_ wpm

Do you have any other skills you wish to mention? \_\_\_\_\_

Are you presently employed? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, may we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, when would you be available? \_\_\_\_\_ Salary Requirements? \_\_\_\_\_

**REFERENCES:**

List at least one professional reference:

Name of Reference \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Name of Reference \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Name of Reference \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

\*For additional references, please attach a separate sheet.

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**I certify at the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind. I agree that the company shall not be held liable in any respect if my employment is terminated because of false statements, answers or omissions made by me in this application. I understand that any misleading or incorrect statements may render this application void, and if employed, may lead to employment termination. I understand that a medical examination based on the requirements of the position for which I am being considered may be required, and drug testing may be included as part of the selection process of applicants for employment. I also authorized the companies, school or persons named above to give any information requested regarding my employment, character and qualification. I hereby release said companies, schools or persons from all liability for any damage for issuing this information. In consideration of my employment, I agree to conform to the rules and regulations of this organization. My employment and compensation can be terminated with our without cause and with or without notice, at any time, at the option of either my employer or myself.**

Signature \_\_\_\_\_ Date \_\_\_\_\_